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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee					Office Use Only			
NAME OF COMMITTEE (in full)	USE FEC MAILING LAI OR TYPE OR PRINT		mple:If typing, er the lines	type				
ADDRESS (number and street) Check if different than previously reported. (ACC)	Post Office Box 25	0116			[GA]	3032		
2. FEC IDENTIFICATION NUMBER 🔻		CITY 🛦			STATE	ZI	ZIP CODE ▲ STATE ▼ DISTRICT	
C00384693	3.	IS THIS REPORT	X NE		AME (A)	NDED	GA	100 J
4. TYPE OF REPORT ((a) Quarterly Reports: April 15 Quarterly July 15 Quarterly October 15 Quarterly January 31 Year-	Report (Q2) terly Report (Q3) -End Report (YE) (c)	Election on	Primary (12 Convention ST-Election Re General (30	eport for the	Specia	(30R)	in the State of	ial (30S)
5. Covering Period 1	0 14 2	010	through	1 1	22	201	Ō	
I certify that I have examined th			dge and belie	f it is true, co	orrect and com	plete.		
Type or Print Name of Treasure	Jon Anderso	<u> </u>						
Signature of Treasurer NOTE: Submission of false, et	represent or incomplete in				Date 12			1 0 437g.
Office Use Only	ingradus, or incomplate in		y subject the			FEC	FORM 3 ised 02/2003)	

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